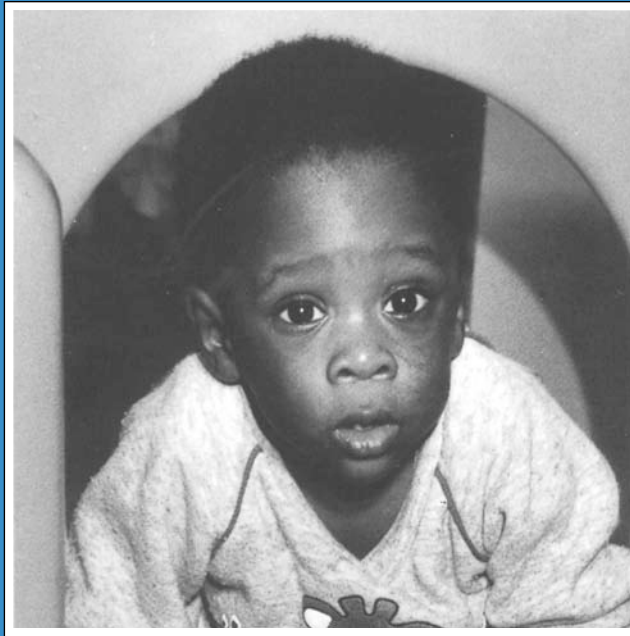




# *Dreams & Challenges*

## A Family's Guide to the Maryland Infants and Toddlers Program

A Statewide, Coordinated System  
of Early Intervention Services



*Teach me about life  
and about love.*

*Teach me who I am  
and where I am going.*

*Teach me to play,  
to dance, to sing.*

*Cover: Home visit with Baltimore City special education teacher*

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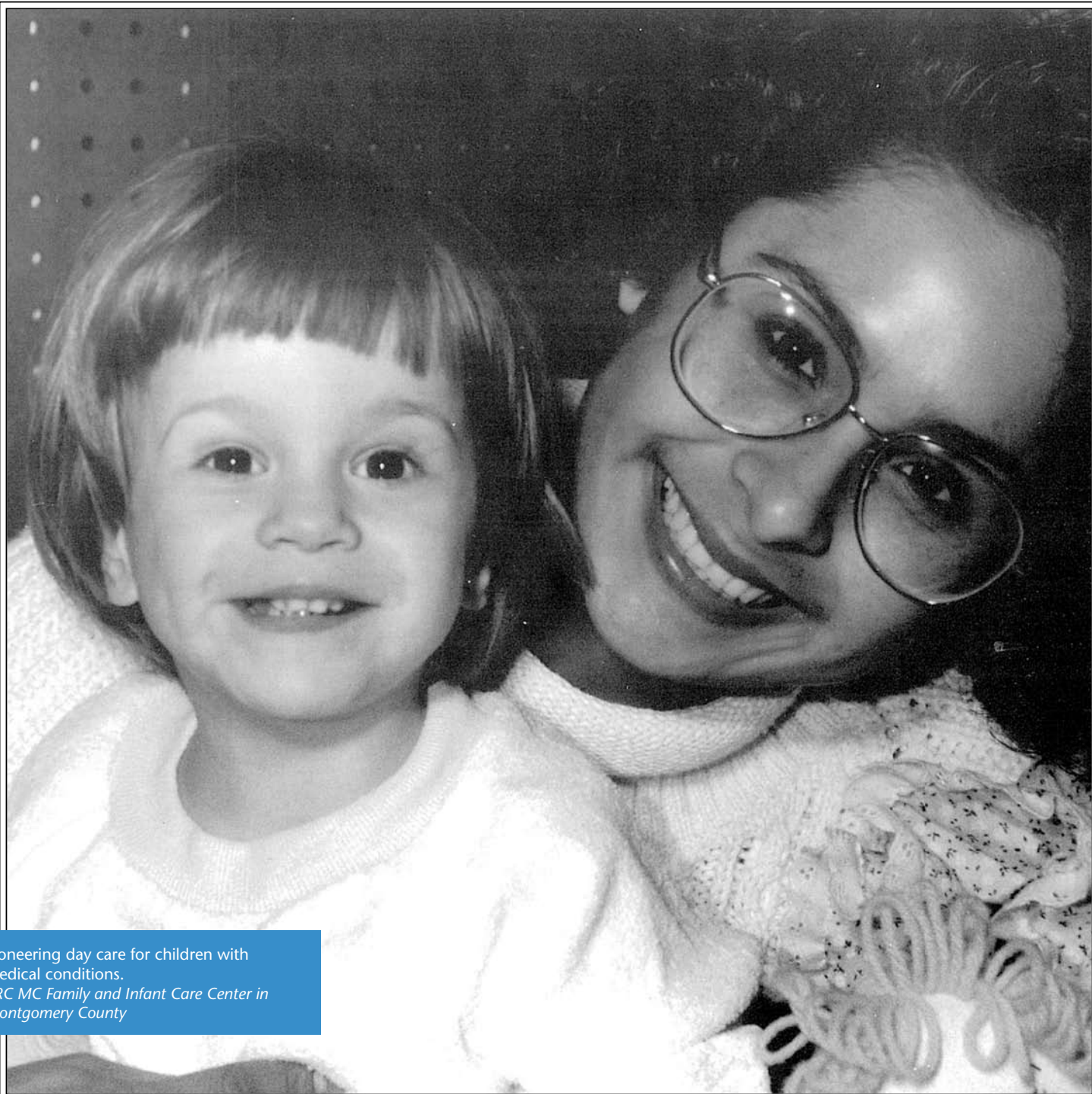
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This book is dedicated  
to *Laura Elizabeth Gortler*  
and to those like her who  
challenge us but never so  
much as they inspire us.



Pioneering day care for children with  
medical conditions.  
*ARC MC Family and Infant Care Center in  
Montgomery County*

# Welcome

You are your child's most important teacher. She sees herself and the world as reflected through your eyes, your voice, your touch. When you look into her round little face, you realize how much her future depends on you and how much your own bundle of hopes and dreams are reflected in her eyes.

Parenting is a great balancing act between dreams and challenges. When you are the parent of a child with, or at risk for, developmental delays, sometimes that scale may seem to tip overwhelmingly toward the challenge side.

*"You see your*

*child's progress and*

*see other people*

*celebrate with you.*

*You're not alone."*

The **Maryland Infants and Toddlers Program** and your local early intervention system will help you face these challenges with a program specially designed to meet the needs of your child and family.

Early intervention is a system of services, ranging from physical therapy to family counseling, offered to enhance a child's potential for growth and development before she reaches school age. Recognizing the importance of early intervention, recent federal and state legislation guarantees your child's right to these services. In Maryland, children from birth to age three who are experiencing development delay, or have an established condition, are eligible.

No one knows a child like her family. And no one is more crucial to her growth and development. For this reason *family* is the underlying theme of the Maryland Infants and Toddlers Program.

Early intervention services are called family-centered because, like branches of a tree, they grow out of the strengths and needs of your child and your family.

Who determines your strengths and needs? *You will.* Together with a group of educators, therapists and other professionals in your county, you will be a vital team member who helps develop a service plan that both meets the needs of your child and builds upon your family's strengths. The result will be your Individualized Family Service Plan, or IFSP, upon which services for your child and family will be based.

With this book we wish to welcome you into a community dedicated to the enrichment of human potential and guide you through a process created by parents and professionals to enhance the potential of your child and support your family.

*Together, we'll make a great team.*





For many families early intervention services begin in the hospital and continue through a variety of community programs.

*Mt. Washington Pediatric Hospital in Baltimore*

# A Window of Opportunity

Just experiencing and keeping up with the changes in your child during her lifetime is the heart of parenting—both the thrill and the challenge. During her first three years, these changes can be mind-boggling.

*“Look how much she’s changed since this picture was taken.” “Can you believe she used to fit into this sleeper?” “She’s into everything.”* These are words most parents have thought or spoken.

But some children don’t learn and grow according to any schedule. For parents of children experiencing delays in growth and development, this can be a time of particular stress and worry.

Research, as well as our own observations, tells us that the first three years of a child’s life are a most critical time of learning. Capitalizing on her natural predisposition to learn during these years, early intervention seeks to open this window of opportunity for your child.

The benefits of early intervention have been well documented. Extra emphasis in areas of need during these years enhances a child’s ability to learn and, in the long run, can prevent the need for more intense treatment later.

## Early intervention services may include:

- case management*
- 
- audiology*
- 
- physical therapy*
- 
- occupational therapy*
- 
- speech-language pathology*
- 
- family training*
- 
- counseling*
- 
- home visits*
- 
- some health services*
- 
- assistive technology services*
- 
- nursing*
- 
- nutrition counseling*
- 
- psychology*
- 
- social work*
- 
- special instruction*
- 
- transportation*
- 
- others as needed*

## Maryland’s System

The **Maryland Infants and Toddlers Program** directs a statewide system of early intervention for eligible children and their families, coordinating services from health care, educational and social service agencies, and private providers.

When an infant or toddler is suspected of having a developmental delay, she is referred by a parent or professional—which can include health and day care, educational and social service providers—to the designated contact point for her county, called the **Single Point of Entry** (see back cover). A service coordinator or case manager will then help arrange for an evaluation and assessment of the child free of charge to determine if she is eligible for early intervention services.

## Who is Eligible?

To be eligible, a child must be experiencing delays of at least 25 percent below her chronological age in one or more of these areas:

- Cognitive  
*her ability to learn*
- Physical  
*her ability to move, see and hear*
- Communication  
*her ability to use language*
- Social and Emotional  
*her ability to have relationships with others*
- Adaptive  
*her ability to dress, eat and take care of herself*

Even when diagnostic procedures do not indicate a 25 percent delay, your child may still be eligible for services if she demonstrates atypical development or behavior in any of the developmental areas listed above.

In addition, a child is eligible if she has a diagnosed physical or mental condition that puts her at risk for developmental delay. Some examples are: severe sensory impairments, inborn errors of metabolism, fetal alcohol syndrome, epilepsy, Down syndrome and other chromosomal abnormalities.



Therapy and fun. Department of Health therapist provides occupational therapy at the Parent Infant Program in Anne Arundel County.



William S. Baer School in Baltimore





Daddy's girl. Home visit in Baltimore

## Evaluation and Assessment

To plan for her evaluation and assessment, your service coordinator will need to gather information about the needs of your child and family, so it is beneficial for you to plan ahead, too. For example, have ready, or be able to identify, medical records, evaluation reports or other information relevant to your child's assessment. Also be thinking about your priorities and concerns related to your child's development, how you would like to participate in the evaluation, and what times and locations are convenient for you. If you require an interpreter, this is the time to notify your service coordinator.

Of course, none of these services can begin without your permission. You will be given a consent form to complete that will indicate your full understanding and agreement with the evaluation process.

Remember, your child's evaluation and assessment are not a test. She cannot pass or fail. They are simply a means of gathering information so we can deliver the best mix of services to aid in her growth and development.

*"When Lacey was three months old we started to notice that she wasn't doing what she was supposed to. Our doctor acquainted us with early intervention, and for me it has been the difference between total depression and absolute hope."*



Big brother helps out.  
*Home visit in Anne Arundel County*

Opposite: *With Parent Infant Program special  
education teacher*

# *IFSP The F is for Family*

*"When she said 'Da*

*Da,' I called her*

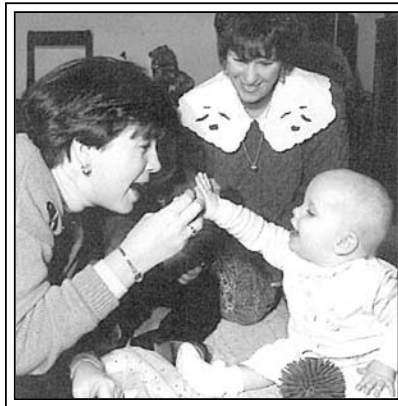
*program director.*

*He sounded as*

*happy as I was."*

Your child's initial evaluation and assessment are complete, and she is eligible for early intervention services. It is time to formulate a plan for your family that will give your child the extra boost she needs to grow and develop and, at the same time, provide you with the special support you need to nurture her. The early intervention team turns to its expert member on your child and family—you.

The Individualized Family Service Plan, or IFSP, is the backbone of family-centered early intervention services. Mandated by federal and State legislation to ensure a family focus for the early intervention process, the IFSP puts in writing your child's strengths and needs, your family's priorities, the outcomes you would like to achieve and, based on these, a precise plan for early intervention. But your IFSP is more than just a written document. It represents a collaborative partnership between you and your early intervention team.



## **Strengths and Needs**

Which of your child's unique qualities can you encourage to help her learn and grow? Is she outgoing and fun-loving? Does she communicate her needs to you? Does she have a favorite activity or game?

By recognizing and building on your child's strengths, your family's early intervention team can provide her with the best opportunities for learning.

What special needs does your child have? Does she need help feeding herself? Communicating? Sitting up? Does she need adaptive equipment?

And what about your family?

It is important for you to identify your resources, concerns and priorities related to enhancing the development of your child.

Do you have good coping skills and a positive attitude? Do you enjoy outdoor activities, but need a means of making them accessible to your child? Do you need respite care or help finding specialized child care?

These are questions that only you can answer. Your answers will make up two sections of the IFSP: *Child's Strengths and Needs and Family Resources, Concerns and Priorities*. These issues become the foundation from which a family-centered early intervention program is built. The strengths of your child and family are precious resources required to fuel your child's growth. Your priorities and concerns will be addressed one by one in order to optimize the benefits of early intervention for you and your child.

Outcomes & Implementation

Once you have established the strengths and needs of your child and your family’s priorities, your early intervention team will list specific outcomes, or goals that you want to achieve, utilizing the services of the early intervention program and your own strengths and resources.

Suppose your daughter needs extra help learning to sit up. Not only would you like her to acquire this skill, but, in the meantime, you want to adapt her highchair and stroller so she doesn’t slide down and end up sitting on her back. Also, it sure would be nice if you could find a stroller that would allow her to go to the sandy playground with her big sisters without getting her wheels stuck.

Your stated outcome in this case might be to help your daughter work toward a sitting position. To reach this goal, your early intervention team could schedule weekly physical therapy to improve sitting skills. They might also help you adapt your daughter’s highchair and stroller so she can sit comfortably at meal- and playtime.

The relationship your daughter has with her older siblings is a family resource. To increase the quality of their interaction, the team might help you adapt your stroller with bigger, all-terrain wheels. Your team could also suggest support groups or counseling for your older children or family.

“The teachers and therapists take the time to explain how to do things and what we should know. It’s the first time we’ve had guidance for what we could do. We feel empowered.”

The law requires that, to the greatest extent appropriate, your child’s early intervention services should be provided in her natural environments—the home or community settings that would be typical for children who are your child’s age, but who have no disability. For many infants and toddlers natural environments might include home, preschool, or child care settings.

An Ongoing Process

Like the evaluation and assessment, your IFSP has to be ongoing in order to be effective. You may request a review at any time to accommodate the changing needs of your child and family. The regular review interval is every six months.

By law, your early intervention

team has 45 days from the time of referral to complete your child’s evaluation and assessment and an initial written IFSP. In Maryland, early intervention services as determined by your IFSP must begin no later than 30 days after it has been signed by you.

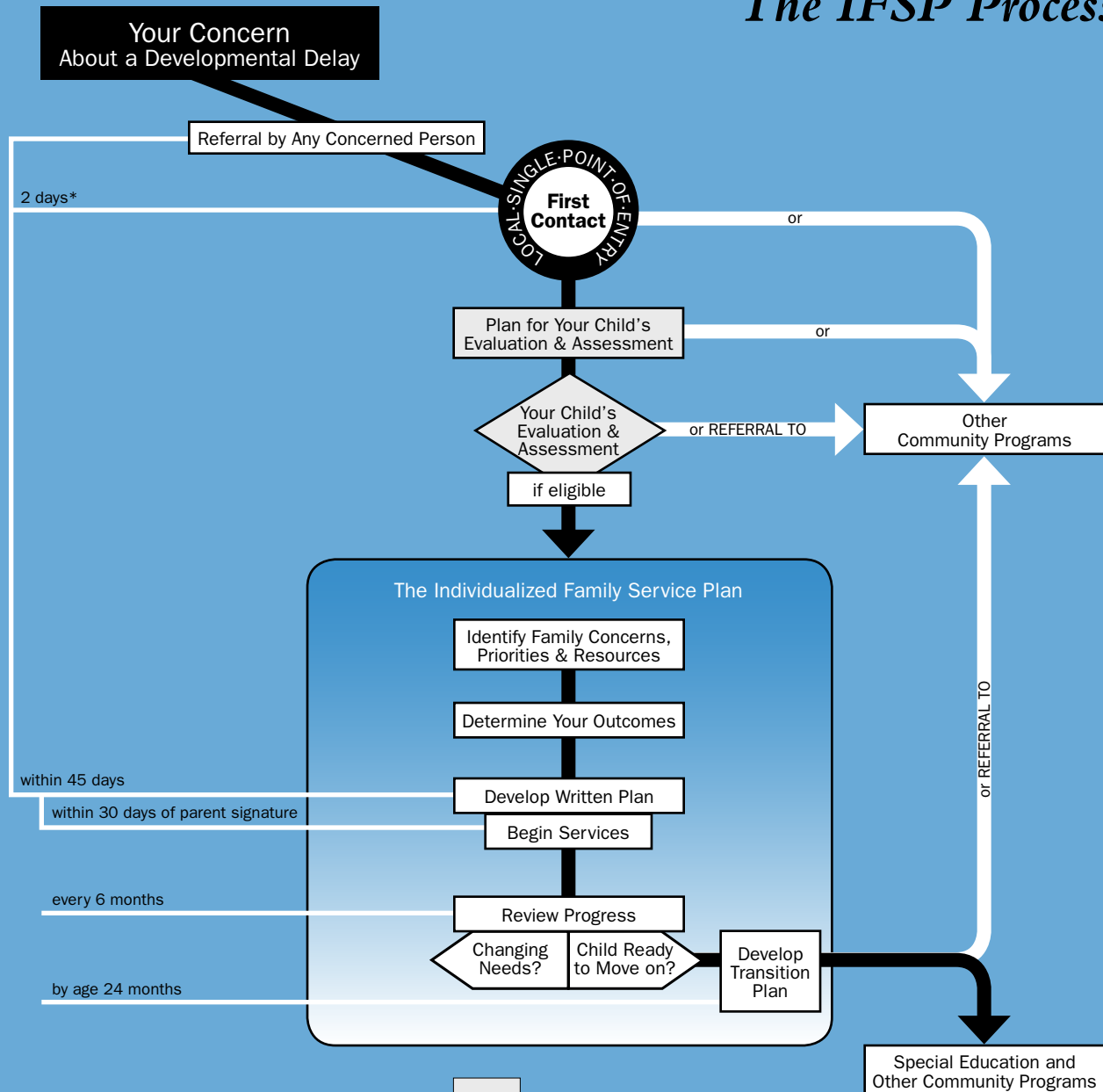
Your service coordinator is the team member designated in your IFSP to coordinate your child’s early intervention services. Whether a special education teacher, veteran parent, therapist, nurse or social worker, the case manager will be your primary point of contact and prove to be an indispensable guide through your early intervention experiences. The IFSP process allows for your participation in selecting your service coordinator.

Sample from Written IFSP

C. Family Resources, Concerns and Priorities Related to Enhancing the Child’s Development (voluntary on the part of the family)	
Resources	Concerns/Priorities
<ul style="list-style-type: none"><li>• parents can tell difference between Beth’s cries, especially when she is hungry or uncomfortable</li><li>• large, supportive, extended family</li><li>• sisters love to play and help out with Beth</li></ul> <p>Maryland Infants and Toddlers Program</p>	<ul style="list-style-type: none"><li>• would like Beth to learn to sit better with less help</li><li>• would like to adapt highchair and stroller to help Beth sit up</li><li>• would like to give Beth and her sisters more chances to play together and give sisters more opportunities to help her</li><li>• interested in support group for sisters</li><li>• interested in respite care</li></ul>



# The IFSP Process



\* Referral by a doctor or other professional is required within two days

These steps may not need to be repeated if your child has already been evaluated.

# How the Law Works for You

## Your Child's Right to Early Intervention

The need for early intervention services seems very clear to us now, but it is only through the exhaustive efforts of countless parents, professionals and lawmakers over the last few decades that they are available to your child today.

The mother of a grown daughter with Down syndrome was recently asked how her family managed 20 years ago. She shrugged and said matter-of-factly, *"Whatever my daughter needed, we organized. When she needed special teachers, we found them. When she needed a place to play, we started a camp. We felt like pioneers."* They were.

Today, society's eyes are opening to the early intervention needs of children with disabilities. In 1975, Congress passed what is now known as the *Individuals with Disabilities Education Act (IDEA)*, the first legislation requiring special education for all school-aged children and youth with disabilities. This was

greatly extended in 1986 with *Public Law 99-457. Part H* of this law mandates family-centered programs for infants and toddlers from birth to age three with disabilities (see timeline below).

This is the landmark legislation upon which the Maryland Infants and Toddlers Program is based. As one of the six original *birth mandate* states, Maryland has offered special education services to infants and toddlers since 1980.

## Your Rights

Built into Part C and State regulations are specific rights for families under the early intervention system. These rights are your legal assurance that the Maryland Infants and Toddlers Program is implemented in a voluntary, nondiscriminatory manner, respecting your views and preferences about the services your child and family receive. They guarantee you access to the information you need to play an active role in the early intervention process.

*Informed Consent* is the most basic of these rights. It ensures that you understand all information related to early intervention activities and give written permission voluntarily before any service begins. You have the right to receive this information in your native language, if necessary, and you may refuse or revoke your consent at any time. You also have the right to decline any early intervention service for your child or family without jeopardizing other early intervention services. Consent is

Here are some highlights of the legislation that has brought us this far:



**1968**

Congress passes the first legislation requiring special education for a group of students—the hearing impaired.



**1970**

*The Early Education for Handicapped Children Program*, providing seed money for experimental schools and early intervention programs, is passed by Congress.

required for all aspects of a service, including its type, purpose, frequency, duration and financial obligation, if any.

*Written Prior Notice* must be given to you before a public agency or service provider proposes, changes or refuses an early intervention activity. Notice must be written in your native language and within a time frame considered reasonable.

*Review and Confidentiality of Records.* You have the right to review your child's early intervention records within 45 days of your request. You may also request that your child's record be amended to ensure the information is not inaccurate, misleading or in violation of your child's rights. Your written consent is required before your child's record can be disclosed to another agency.

The *Maryland State Interagency Coordinating Council (SICC)* is mandated by Part C to ensure public representation on issues relating to the law. Appointed by the Governor, SICC representatives are parents, service providers, public agency employees, legislators and others who work diligently to develop quality statewide early intervention services. Family members are encouraged to

attend the SICC's regularly scheduled public meetings.

Meeting agendas are available through the Maryland Infants and Toddlers Program. There are also *Local Interagency Coordinating Councils (LICC)*s in Maryland counties.

### **Resolving Concerns, Exercising Options**

There may be an occasion when you disagree with decisions made about your child's early intervention services on issues that may include eligibility, evaluation or assessment, provision of services or financial obligations.

*Impartial Complaint Resolution* is one avenue open to families for addressing complaints formally. This procedure allows for an impartial hearing to resolve a dispute between you and an agency or service provider, based on evidence presented by both parties of the dispute and their witnesses.

## **Resolving Concerns**

*Under the law, you may consider the following options singly or in combination:*

Present your concerns to your service coordinator (case manager) or service provider

•

Request mediation through the *Office of Administrative Hearings* in order to resolve your concerns prior to submitting a written complaint

•

File a written complaint with the *Maryland Infants and Toddlers Program* requesting an *Impartial Complaint Resolution Procedure*, which may also include mediation.



**1975**  
Congress passes the Education for All Handicapped Children Act, (now known as the Individuals with Disabilities Education Act), PL 94-142, extending the 1968 legislation to all groups of students with disabilities.



**1983**  
PL 98-199 is passed, setting aside funding for the development of grants for preschool programs.

The issue will be decided by your choice of an administrative law judge or a panel including an administrative law judge or a panel including an administrative law judge and two hearing officers. You are entitled to have an attorney and advisors present. The hearing is provided at no cost to you, with the exception of any professionals you decide to hire to represent you.

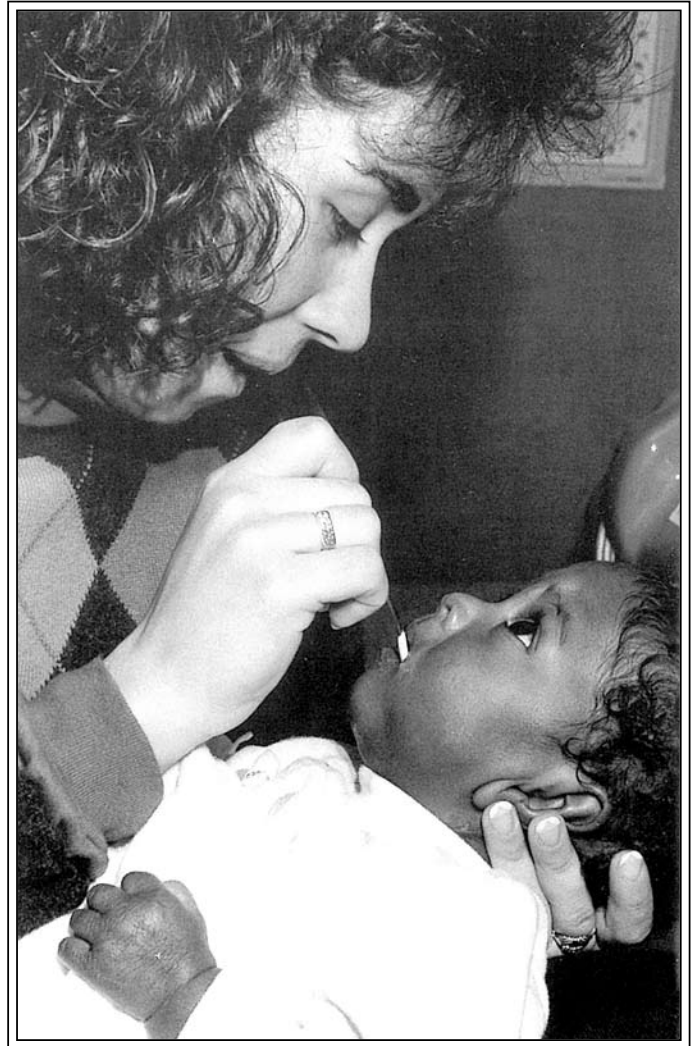
*Mediation* is another option available to parents. It allows both parties of a dispute to enter into a discussion under the guidance of an impartial, trained mediator. Each side will be allowed to present facts and ideas, and the mediator will facilitate an agreement that is in the best interest of the child and family. The mediation process can be discontinued at any time if you decide that it is no longer beneficial. This is not a hearing; no record of what you say is written unless you reach an agreement.

To request a hearing by the Office of Administrative Hearings, you must file a written complaint with the

Maryland Infants and Toddlers Program. The Office of Administrative Hearings offers mediation services to families and Infants and Toddlers' staff. An administrative law judge will mediate discussions between both parties, and an attorney is permitted at this type of mediation. If you are able to resolve the problem during mediation, your request for an Impartial Complaint Resolution Procedure can be withdrawn.

Since your child's welfare is the key concern, her services will not be interrupted by any complaints or procedures you may initiate. In Maryland, the complaint resolution process is conducted at the state level so that it does not interfere with early intervention services, which are rendered at the local level.

Federal law requires the speedy resolution of individual complaints, recognizing that *"an infant's or toddler's development is so rapid that undue delay could be potentially harmful."*



ARC MC Family and Infant Care Center in Montgomery County

## The Law



### 1985

The Department of Education reports to Congress on the progress of PL 94-142, stating studies show that *"the earlier intervention is started...the higher the rate of educational attainment by...handicapped children."*



### 1986

Congress enacts landmark legislation for early intervention with PL 99-457, an amendment to the 1975 law, giving states significant incentives to serve all eligible three- to five-year-olds by 1991-92, including:

- Part H, which mandates family-centered programs for infants and toddlers from birth to age three with disabilities



## Related Laws That Can Help

For more information about the *Impartial Complaint Resolution Procedure* and mediation through the *Office of Administrative Hearings* call the Maryland Infants and Toddlers Program.

“...as early  
intervention  
programs become  
established under  
P.L. 99-457...  
you are not going  
to hear words like  
hopeless... anymore.  
Children with  
handicaps are going  
to achieve things  
that no one thought  
possible.”

Robert Silverstein

Staff Director and Chief Council  
Subcommittee on the Handicapped  
Senate Committee on Labor and  
Human Resources

Addressing the national meeting  
of Project Zero to Three

November 3, 1988

### Civil Rights Act of 1964

Bars discrimination on the basis of race, color and national origin.

### Architectural Barriers Act of 1968

Requires buildings and facilities that were designed, constructed, altered or leased with certain federal funds—including grants and loans—to be accessible to and usable by people with disabilities.

### Rehabilitation Act of 1973

Applies to all federal agencies and the Postal Service, as well as private entities receiving federal funds, in the areas of affirmative action and accessibility.

### SECTION 502

Establishes the Architectural and Transportation Barriers Compliance Board.

### SECTION 504

Requires any private or public entity accepting federal funds to:

- functionally redesign and redefine their services for effective use by people with disabilities
- provide different services only if it's necessary in order to provide effective services
- make reasonable accommodations to hire people with disabilities
- make all new construction accessible and usable by people with disabilities

**Section 504** covers education, vocational training and jobs, recreation, health care, housing, transportation, services and remedial action. Under this law, schools and employers must provide interpreters and Braille or taped copies of documents. Cost is not a defense.

### Education of All Handicapped Children Act of 1975

Now known as the *Individuals with Disabilities Education Act (IDEA)*, this was the first legislation requiring a free, appropriate, public education for school-aged children and youth with disabilities and guarantees due process and procedural safeguards for them and their families.

### Air Carriers Access Act of 1986

Mandates that no air carrier may discriminate against an otherwise qualified person with a disability in the provision of air transportation. Includes accessibility within the aircraft and terminal, services and equipment provided, advance notice, attendants and seat assignments.

### Fair Housing Amendments Act of 1988

Added families with children and people with disabilities to the list of protected groups that cannot be discriminated against in the rental, lease, sale or financing of housing. This is the law of the land; federal funds are not at issue.

### Americans With Disabilities Act of 1990

Covers employment (*Title I*); Public Services (*Title II*); Public Accommodations and Services Operated by Private Entities (*Title III*); Telecommunications (*Title IV*); Miscellaneous Provisions (*Title V*); and Transportation (*Titles II and III*). This is the law of the land; federal funds are not at issue

# is on Your Side



**1991**  
President Bush signs PL 102-119, *Individuals with Disabilities Education Act Amendments of 1991*, reauthorizing Part H and supporting even greater outreach to eligible children and families.





When challenge meets its match.  
*Kennedy Preschool at the Kennedy Krieger  
Institute in Baltimore*

# Age Three & Beyond

*"If I had any insecurities about sending him to nursery school, they melted away when I met the people there. I met his teacher, his therapists, the support staff. Within three hours the transportation people were at my house taking pictures of his wheelchair to make sure it would fit on the van."*

Your child's early intervention schedule has become second nature to you both; your early intervention team has become, in many respects, a circle of friends whose common bond is your child. But now it's time to get ready for a change.

New beginnings are at the same time exciting and anxiety-provoking. The thought of opening a new chapter in your child's life can be at one moment exhilarating and stressful at the next. Your IFSP includes a written plan that ensure a smooth transition and continuity of services when it is time to bring your child's chapter of early intervention to a close.

## Transition

When your child reaches three years of age, she is no longer eligible to receive early intervention services through the Maryland Infants and Toddlers Program. However, your written transition plan will help you identify appropriate special education or community-based services for her.

For most children, the transition plan is written at age 24 months. If your child is just beginning her early intervention services at this age or older, the

## Your transition plan will:

*Schedule new evaluations to determine if your child is eligible for special education programs, identify those programs and help you access them*

•

*Initiate transmission of specific information to appropriate agencies (with your written consent)*

•

*Identify community programs for your child and family and help you access them*

•

*Safeguard your parental rights and outline your responsibilities*

•

*Take steps to help your child adjust to her new environments*

transition plan will be included in your initial IFSP.

If evaluation and assessments no longer indicate developmental delay, a transition plan can be written for a child at any age.

## A New Focus

Focus is the primary difference between services provided to infants and toddlers and those provided to preschoolers and older children.

Under Part C, early intervention services must be family-centered. The IFSP is the vehicle that accomplishes this family focus.

Once your child turns three, her services—if she is eligible—may fall under Part B of the *Individuals with Disabilities Education Act*, which requires services to be child-focused, or based on the needs of the individual child. Instead of an IFSP, your child's needs and services will be developed on the basis of an *Individualized Education Program*, or *IEP*.

Community-based programs and services that may be considered at age three can include child care, preschool, Head Start, and residential or day camps.

Good planning is essential to a successful transition for your child and family. Your transition plan will highlight the changes that the coming year will bring, and your early intervention team will help you ask questions, make new contacts, and visit new schools and agencies. With careful preparation and professional guidance, your child will be on her way to a world of new opportunities beyond early intervention.

# Groups That Can Help



*"Our group matched us up with other families, so we have the support of people who are going through similar things."*

People need people. There may be a time when you need the support of individuals other than your early intervention team, your friends or even your family—people who have specialized resources, talents or simply have had life experiences that are similar to yours.

The **Family Support Network** is a group created by the Maryland Infants and Toddlers Program to provide a family perspective to our system of early intervention. Comprised of families from all regions of the state, FSN fields parents' questions and gives assistance, information, training and support through *local Family Support Networks*. The FSN also notifies parents of conferences, workshops and training programs; works to increase public awareness of early intervention issues among such groups as child study associations and registered day care providers; and provides assistance to State and local Interagency Coordinating Councils.

In addition, the Maryland Infants and Toddlers Program offers direct family support through conferences and workshops on family and early intervention issues, and resource and referral services.

For more information call the Maryland Infants and Toddlers Program or ask your service coordinator.



## Support Groups

There are many organizations and groups in Maryland that provide a wealth of information, technical assistance and support. The following list is not exhaustive. For information on rare disorders call the Maryland Infants and Toddlers Program, or ask your service coordinator about groups in your area.

*American Society for Deaf Children*  
2848 Arden Way, Suite 210  
Sacramento, CA 95825-1373  
(800) 942-2732 or (TDD)  
942-2732  
[www.deafchildren.org](http://www.deafchildren.org)

*Autism Society of America*  
7910 Woodmont Avenue,  
Suite 300  
Bethesda, MD 20814  
(301) 657-0081  
(800) 328-8476  
[www.autism-society.org](http://www.autism-society.org)

*Chesapeake Down Syndrome  
Parent Support Group, Inc.*  
1511 Amesbury Court  
Bel Air, MD 21014  
(410) 879-6675  
[www.cdspg.org](http://www.cdspg.org)

*Cystic Fibrosis Foundation*  
10155 York Road, Suite 101  
Cockeysville, MD 21030  
(410) 628-0795  
(800) 731-2873  
[www.cfll.org](http://www.cfll.org)

*Abilities Network/Epilepsy  
Foundation*  
300 E. Joppa Road, Suite 1103  
Towson, MD 21286  
(410) 828-7700  
(800) 492-2523  
[www.abilitiesnetwork.org](http://www.abilitiesnetwork.org)

*Arc of Maryland*  
40 Old Solomons Island Road,  
Suite 205  
Annapolis, MD 21401  
(410) 571-9320  
[www.thearcmd.org](http://www.thearcmd.org)

*Brain Injury Association of  
Maryland, Inc.*  
Kernan Hospital  
2200 Kernan Drive  
Baltimore, MD 21207  
(410) 448-2924  
(800) 731-2873  
[www.biamd.org](http://www.biamd.org)

*Muscular Dystrophy Association  
of Maryland*  
8501 La Salle Road, Suite 106  
Baltimore, MD 21286  
(410) 494-7072  
(888) 484-7072  
[www.madausa.org](http://www.madausa.org)

*Family Support Network  
Maryland Infants and  
Toddlers Program  
Maryland State Department  
of Education*  
200 W. Baltimore Street, 9th floor  
Baltimore, MD 21201  
(410) 767-0261  
(800) 535-0182  
[www.MarylandPublicSchools.org](http://www.MarylandPublicSchools.org)

*The Family Three*  
2108 N. Charles Street  
Baltimore, MD 21218  
(410) 889-2300  
(800) 243-7337 Hotline  
[www.familythreemd.org](http://www.familythreemd.org)

*Parents of Blind Children  
National Federation of the Blind*  
603 S. Milton Ave.  
Baltimore, MD 21224  
(410) 659-9314

*Spina Bifida Association*  
600 W. Baker Avenue  
Abingdon, MD 21009  
(410) 550-0616  
[www.sbaa.org](http://www.sbaa.org)

*United Cerebral Palsy of  
Central Maryland*  
1700 Reisterstown Road,  
Suite 226  
Baltimore, MD 21208  
(410) 484-4540  
(800) 451-2452  
[www.ucp.org](http://www.ucp.org)

## Advocacy Groups

Many organizations provide child advocacy services. When you need someone to speak on behalf of your child and family, you can find a qualified, trained advocate from one of the following organizations.

*Maryland Legal Aid Bureau*  
500 E. Lexington Street  
Baltimore, MD 21202  
(410) 951-7777  
(800) 999-8904  
[md.mdlab.org](http://md.mdlab.org)

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# Say That Again?

## A Glossary

*As a vital team member in the early intervention process, it is important that you become familiar with the language of your fellow players. The following is by no means a complete list of all the terms and phrases that you might encounter. Remember, your full understanding and consent is paramount, so if ever you don't understand a term or concept, ask.*

### **Assessment**

Ongoing procedures used by qualified professionals throughout a child's early intervention experience to identify her unique needs; the family's resources, concerns and priorities related to her development; and the nature and extent of early intervention services required to meet these needs.

### **Child Advocate**

A parent or professional, paid or unpaid, who acts on behalf of a child and family to protect their rights and interests and ensure their access to services for which they are eligible.

### **Early Intervention**

A collection of services provided by public and private agencies and designed by law to support eligible children and their families in enhancing a child's potential for growth and development from birth to age three.

### **Early Intervention Record**

Any personally identifiable information about a child or family generated by the early intervention system that pertains to evaluation and assessment, development of the IFSP and delivery of early intervention services.

### **Evaluation**

Procedures used by qualified professionals to determine a child's initial and continuing eligibility for early intervention services, consistent with the definition of *infants and toddlers with disabilities*.

### **Impartial**

Describes the person appointed to implement the complaint resolution process who is not an employee of any agency or program involved in provision of early intervention services or care of a child and does not have a personal or professional conflict of interest in the case.

### **Individualized Family Service Plan (IFSP)**

The written plan for providing early intervention and other services to eligible children and families that:

- *Is developed jointly by the family and appropriate professionals;*

- *Is based on a multidisciplinary evaluation and assessment of the child and family as required by law;*
- *Includes services necessary to enhance the development of the child and the capacity of the family to meet her needs.*

### **Infants and Toddlers with Disabilities**

Children from birth to age three who are eligible for early intervention because they:

- *Are experiencing a developmental delay of at least 25 percent, as measured and verified by appropriate methods, in one or more of the following areas:*
  - Cognitive
  - Physical  
(*fine/gross motor, sensory*)
  - Communication
  - Social and emotional
  - Adaptive; or
- *Exhibit atypical development or behavior in at least one of the above areas, demonstrated by abnormal quality or function, that interferes with current development and is likely to result in subsequent delay, even when diagnostic procedures do not indicate a delay of 25 percent; or*

- *Have a diagnosed physical or mental condition that puts them at risk for developmental delay.*

### **Interim Service Coordinator/Interim Case Manager**

The individual designated at the single point of entry to assist the referred child and family through the initial evaluation and assessment and IFSP process.

### **Multidisciplinary**

The involvement of two or more professions in the provision of integrated and coordinated services, including evaluation and assessment activities and the development of the IFSP.

### **Native Language**

The language or mode of communication normally used by the parent of an eligible child.

### **Natural Environments**

Home and community settings that are natural or typical for a child of the same age without disabilities.

### **Parent**

A parent, guardian, acting parent or surrogate parent. The term does not include the state if the child is a ward of the state.

### **Periodic Review**

A review of the IFSP conducted every six months, more frequently as conditions warrant or at the family's request.

### **Service Coordinator/Case Manager**

The individual selected by an early intervention team and designated in an IFSP to coordinate and facilitate early intervention services and integrate the family into the process. Service provider or veteran parent, the case manager must demonstrate understanding of the laws and nature of the process.

### **Service Provider**

A public or private agency designated to provide early intervention services for an eligible child and the child's family in accordance with an approved IFSP.

### **Single Point of Entry**

The local contact point designated to accept referrals from sources who suspect developmental delay in an infant or toddler

## **Abbreviations Used in Early Intervention**

### **CMS**

Children's Medical Services

### **COMAR**

Code of Maryland Regulations

### **DHMH**

Department of Health and Mental Hygiene

### **DHR**

Department of Human Resources

### **DSS**

Department of Social Services

### **EC**

Early Childhood (ages 3 to 5)

### **EHA**

Education for All Handicapped Children Act

### **EI**

Early Intervention (ages birth to 3)

### **FICC**

Federal Interagency Coordinating Council

### **GOC**

Governor's Office for Children

### **ICC**

Interagency Coordinating Council

### **IDEA**

Individuals with Disabilities Education Act

### **IFSP**

Individualized Family Service Plan

### **LICC**

Local Interagency Coordinating Council

### **LITP**

Local Infants and Toddlers Program

### **MITP**

Maryland Infants and Toddlers Program

### **MSDE**

Maryland State Department of Education

### **OSEP**

Office of Special Education Programs

### **OSERS**

Office of Special Education and Rehabilitative Services

### **Part C**

Section of IDEA pertaining to ages birth to 3

### **PL**

Public Law

### **PL 94-142**

Education for All Handicapped Children Act

### **PL 99-457**

Amendments to EHA containing Part H

### **PL 101-476**

Amendments to EHA changing name to IDEA

### **PL 102-119**

Individuals with Disabilities Education Act (IDEA) Amendments of 1991; reauthorizes Part H

### **SEA**

State Education Agency

### **SICC**

Maryland State Interagency Coordinating Council



# For More Information

In Maryland, early intervention services are provided at the local level through Public School Systems, Departments of Health and Social Services, and a variety of other public, private and nonprofit agencies. For more information about your Local Infants and Toddlers Program and Family Support Network, please call the Single Point of Entry listed below for your county or the Maryland Infants and Toddlers Program: 1-800-535-0182 (Maryland Relay 1-800-201-7165 or 711).

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